



Attorney Docket No.: F134

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

1. My residence, post office address and citizenship are as stated below next to my name.
2. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled: "PROXIMITY DEPOSITION ", the specification of which:
_____ is attached hereto.
_____ X was filed on June 27, 2003, Application Serial No.: 10/607,814
3. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.
4. I acknowledge the duty to disclose to the Office all information known to be material to patentability as defined in 37 CFR § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.
5. I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

			Priority Claimed
_____	_____	_____	_____
(Number)	(Country)	(Day/Month/Year Filed)	Yes/No
_____	_____	_____	_____
(Number)	(Country)	(Day/Month/Year Filed)	Yes/No

6. I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

Prior Provisional Application(s)

			Priority Claimed
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	_____ Yes/No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	_____ Yes/No

7. I hereby claim the benefit under Title 35, United States Code, § 120 of the United States application(s) listed below and, insofar as the subject matter of each of the claims in this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

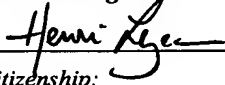
U.S. Application

_____ Application No.	_____ Filing Date	_____ Status	_____ Patent No.
_____ Application No.	_____ Filing Date	_____ Status	_____ Patent No.

8. I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith:
Practitioners at customer number 25784,
including Michael O. Scheinberg, Reg. No. 36,919
9. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<i>Full Name of First Inventor:</i> Jason Harrison Arjavac	<i>Inventor's Signature:</i>	<i>Date:</i>
<i>Residence: (City, State Only)</i> Portland, OR	<i>Citizenship:</i> USA	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> One:: 18912 NW Logie Trail, Portland, OR 97231-1905		

<i>Full Name of Second Inventor:</i> Liang Hong	<i>Inventor's Signature:</i>	<i>Date:</i>
<i>Residence: (City, State Only)</i> Hillsboro, OR	<i>Citizenship:</i> China	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> 2765 NW John Olsen Ave. #G96, Hillsboro, OR, 97124		

<i>Full Name of Third Inventor:</i> Dr. Henri Lezec	<i>Inventor's Signature:</i> 	<i>Date:</i> July 6, 2004
<i>Residence: (City, State Only)</i> Strasbourg, France	<i>Citizenship:</i> USA	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> ISIS, ULP 8 rue Gaspard Monge, Strasbourg, France, 67000		

<i>Full Name of Fourth Inventor:</i> Craig Matthew Henry	<i>Inventor's Signature:</i>	<i>Date:</i>
<i>Residence: (City, State Only)</i> Aloha, OR	<i>Citizenship:</i> USA	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> 19897 SW Holly Woods Ct, Aloha, OR 97007		

<i>Full Name of Fifth Inventor:</i> John Anthony Notte IV	<i>Inventor's Signature:</i>	<i>Date:</i>
<i>Residence: (City, State Only)</i> Gloucester, MA	<i>Citizenship:</i> USA	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> 18 Lawndale Circle, Gloucester, MA 01930		



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Prior Foreign Application(s)

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Prior Provisional Application(s)

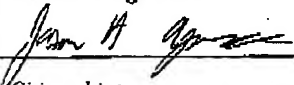
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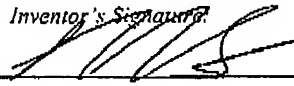
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U.S. Application

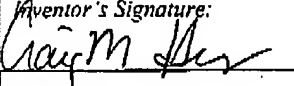
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
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<i>Full Name of First Inventor:</i> Jason Harrison Arjavac	<i>Inventor's Signature:</i> 	<i>Date:</i> 6/28/2004
<i>Residence: (City, State Only)</i> Portland, OR	<i>Citizenship:</i> USA	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> One: 18912 NW Logie Trail, Portland, OR 97231-1905		

<i>Full Name of Second Inventor:</i> Liang Hong	<i>Inventor's Signature:</i> 	<i>Date:</i> 6/28/2004
<i>Residence: (City, State Only)</i> Hillsboro, OR	<i>Citizenship:</i> China	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> 2765 NW John Olsen Ave. #G96, Hillsboro, OR, 97124		

<i>Full Name of Third Inventor:</i> Dr. Henri Lezec	<i>Inventor's Signature:</i>	<i>Date:</i>
<i>Residence: (City, State Only)</i> Strasbourg, France	<i>Citizenship:</i> USA	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> ISIS, ULP 8 rue Gaspard Monge, Strasbourg, France, 67000		

<i>Full Name of Fourth Inventor:</i> Craig Matthew Henry	<i>Inventor's Signature:</i> 	<i>Date:</i> 6/28/2004
<i>Residence: (City, State Only)</i> Aloha, OR	<i>Citizenship:</i> USA	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> 19897 SW Holly Woods Ct, Aloha, OR 97007		

<i>Full Name of Fifth Inventor:</i> John Anthony Notte IV	<i>Inventor's Signature:</i> <i>John A. Notte</i> 	<i>Date:</i> 12 May 2004
<i>Residence: (City, State Only)</i> Gloucester, MA	<i>Citizenship:</i> USA	
<i>Post Office Address: (Address, City, State and ZIP Code)</i> 18 Lawndale Circle, Gloucester, MA 01930		